Fill in this information to identify your c	Fill in this information to identify your case:			
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI				
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13			

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your ful	l name		
governm identifica	e name that is on your nent-issued picture ation (for example, er's license or c).	Mary First Name L Middle Name	First Name Middle Name
		Robinson	
identifica	ur picture ation to your meeting	Last Name	Last Name
with the	trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other	r names you		
have use years	ed in the last 8	First Name	First Name
	our married or	Middle Name	Middle Name
maiden r	names.	Last Name	Last Name
•	e last 4 digits of cial Security	xxx - xx - <u>0</u> <u>9</u> <u>9</u> <u>8</u>	xxx - xx
	or federal al Taxpayer	OR	OR
	ation number	9xx - xx	9xx - xx

Deb	btor 1 Mary L Robinson	1 (Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer	✓ I have not used any business names or EIN	s. I have not used any business names or EINs.		
	Identification Numbers (EIN) you have used in the last 8 years	Business name	Business name		
	Include trade names and	Business name	Business name		
	doing business as names	Business name	Business name		
			<u></u>		
		=	= IN		
_	Whore you live	EIN — — — — — —	EIN		
5.	Where you live	0404 070, 00	If Debtor 2 lives at a different address:		
		2131 67th St Number Street	Number Street		
		Saint Louis MO 63121			
		City State ZIP Code	City State ZIP Code		
		Saint Louis County	County		
		If your mailing address is different from	If Debtor 2's mailing address is different		
		the one above, fill it in here. Note that the	from yours, fill it in here. Note that the court		
		court will send any notices to you at this mailing address.	will send any notices to you at this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
		Oily State 217 Code	State ZIF Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2: Tell the Court	About Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing f page 1 and check the appropriate box.		
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12			
		☑ Chapter 13			

Deb	otor 1 Mary L Robinson		Case number (if known)				
8.	How you will pay the fee	cou pay	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				
		By I thar fee	quest that my fee be waived (You may law, a judge may, but is not required to, in 150% of the official poverty line that ap in installments). If you choose this option general Fee Waived (Official Form 103B) and	waive your fee, and poplies to your fame on, you must fill o	nd may do ily size and ut the App	so only if your income is less d you are unable to pay the	
9.	Have you filed for	☑ No					
	bankruptcy within the last 8 years?	☐ Yes	S.				
		District		When		Case number	
		District					
		District .		MM / [DD / YYYY		
		District		When	DD / YYYY	Case number	
10.	Are any bankruptcy	√ No					
	cases pending or being filed by a spouse who is	— ☐ Yes	S.				
	not filing this case with	— Debtor		1	Relationsh	ip to you	
	you, or by a business partner, or by an	District				Case number,	
	affiliate?	·			DD / YYYY		
		Debtor		1	Relationsh	ip to you	
		District		When	DD / YYYY	Case number,	
11.	Do you rent your residence?	✓ No. Yes	Go to line 12. S. Has your landlord obtained an eviction	on judgment agair	nst you?		
			No. Go to line 12. Yes. Fill out Initial Statement Al		Judgment /	Against You (Form 101A)	

Deb	tor 1 Mary L Robinson					_ Case number	(if known)		
Pa	Report About An	у Ві	usine	sses You Own as a	a Sole P	roprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	usiness				
b ir se a	A sole proprietorship is a business you operate as an individual and in not a			Name of business, if any					
	individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number Street					
	If you have more than one sole proprietorship, use a			City			State	ZIP Co	de
	separate sheet and attach it to this petition.			Single Asset Rea Stockbroker (as of	ness (as d Il Estate (a defined in 1 er (as defin	scribe your busines efined in 11 U.S.C. s defined in 11 U.S 11 U.S.C. § 101(53/ ned in 11 U.S.C. § 1	§ 101(27A)) .C. § 101(51B)))	
Chapter Bankrup are you debtor o	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S.C.	cho are mos	osing t a smal st recer	filing under Chapter 11, o proceed under Subch. I business debtor or yount balance sheet, statem these documents do no	apter V so u are choos nent of ope	that it can set appr sing to proceed und erations, cash-flow s	opriate deadlir ler Subchapter statement, and	nes. If you r V, you mu I federal in	i indicate that you ust attach your come tax return
	§ 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.				
			No.	I am filing under Chapt the Bankruptcy Code.	ter 11, but	I am NOT a small b	ousiness debto	or accordin	g to the definition in
			Yes.	I am filing under Chap Bankruptcy Code, and	-			•	
			Yes.	I am filing under Chap Bankruptcy Code, and			•	•	` '
Pa	Report If You Ow	n o	r Hav	e Any Hazardous F	roperty	or Any Proper	ty That Ned	eds Imm	ediate Attentior
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	What is the hazard?					
	safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed,	, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent			Where is the property?	? Number	Street			
	repairs?								
					City			State	ZIP Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not	requir	ed to re	ceive a briefin	g about			
credit counseling because of:							

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. $\sqrt{}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. \square No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and □ No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 1,000-5,000 18. How many creditors do 1-49 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 10,001-25,000 More than 100,000 100-199 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion $\mathbf{\Lambda}$ estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 П \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million П More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion

П

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

 $\overline{\mathbf{A}}$

estimate your liabilities to

be?

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

More than \$50 billion

П

П

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Mary L Robinson	X
Mary L Robinson, Debtor 1	Signature of Debtor 2
Executed on 04/16/2021	Executed on
MM / DD / YYYY	MM / DD / YYYY

Debtor 1 Mary L Robinson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jonathan Brent	Date	
Signature of Attorney for Debtor		MM / DD / YYYY
Jonathan Brent		
Printed name		
Jonathan Brent Attorney at Law		
Firm Name		
462 N Taylor		
Number Street		
Suite 106		
St. Louis	MO	63108
City	State	ZIP Code
Contact phone (314) 200-5346	Email address	
Contact phone (314) 200-5346	Email address	
59169MO		
Bar number	State	

	ormation to luc	entify your case	and this filing:			
Debtor 1	Mary First Name	L Middle Name	Robinson Last Name			
Dahtar 2	Thor traine	mado . ao	Edot Harrio			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for t	the: EASTERN DI S	STRICT OF MISSOURI			
Case number						
(if known)					if this is an ded filing	
Official Form	106A/B					
Schedule A/					12/15	
filing together, bot	th are equally resp	ponsible for supply	Be as complete and accurate a ying correct information. If mo	ore space is needed, attach a	separate	
			, write your name and case nu	-	=	
_						
Part 1: Des	scribe Each Re	sidence, Buildi	ing, Land, or Other Real	Estate You Own or Have	e an Interest In	
1. Do you own o	or have any legal (or equitable interes	st in any residence, building, la	and, or similar property?		
□ No. Go to	to Part 2.	•	•			
Yes. Wh	nere is the property?	?				
1.1.			the property?	Do not deduct secured clai	•	
2131 67th St Street address, if availa	abla or other description		I that apply.	amount of any secured cla Creditors Who Have Claim		
Sileei auuless, ii avaiid	IDIE, OI OTHER GESCHPTIC	<u> </u>	le-family home ex or multi-unit building	Current value of the	Current value of the	
		Cond	dominium or cooperative	entire property?	portion you own?	
St. Louis	MO 6312 State ZIP C	<u></u>	ufactured or mobile home	\$33,000.00	\$33,000.00	
Oity	C	Ш	stment property	Describe the nature of yo	our ownership	
St. Louis		ш.	eshare	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
County		Other	r	_), II KIIOWII.	
	ence	Who has Check on	s an interest in the property?	Fee Simple		
Principal Reside		_ 5.1.		☐ Check if this is community property		
Principal Reside		✓ Depto	or 1 only		nunity property	
Principal Reside		☐ Debto	or 2 only	(see instructions)	nunity property	
Principal Reside		Debto	or 2 only or 1 and Debtor 2 only	(see instructions)	nunity property	
Principal Reside		Debto	or 2 only or 1 and Debtor 2 only ast one of the debtors and anoth	(see instructions)	nunity property	
Principal Reside		☐ Debto☐ Debto☐ At lea	or 2 only or 1 and Debtor 2 only ast one of the debtors and anoth formation you wish to add abo	(see instructions)	nunity property	
		Debto	or 2 only or 1 and Debtor 2 only ast one of the debtors and anoth	(see instructions) her out this item, such as local	munity property	

Deb	tor 1	Mary L	Robinson		Case number (if known)	
Pa	art 2:	Descr	ibe Your Vehicles			
-			•	ole interest in any vehicles, whether they se a vehicle, also report it on Schedule G: E	_	
3.	Cars, v		ks, tractors, sport utili	ty vehicles, motorcycles		
Othe	el: roximate er inform 3 Toyo es) Waterc	e mileage: nation: ta Matrix raft, aircr les: Boats	•	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot Check if this is community proper (see instructions) S and other recreational vehicles, other nal watercraft, fishing vessels, snowmobile	vehicles, and accessories	ims on Schedule D:
5.	Add the	e dollar va		own for all of your entries from Part 2, in Part 2. Write that number here	_	\$2,500.00
Pa	art 3:	Descr	ribe Your Personal	and Household Items		
Do y 6.		or have a		interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp. □ No	•	appliances, furniture, li	nens, china, kitchenware		
	_		e Miscellaneous	household goods and furnishings		\$1,000.00
7.	□ No	les: Telev music	c collections; electronic	o, video, stereo, and digital equipment; com devices including cell phones, cameras, mo household electronics	•	\$1,000.00
8.			ues and figurines; painti	ings, prints, or other artwork; books, picture collections; other collections, memorabilia.		J
	✓ No ☐ Yes	s. Describ	e]
9.		les: Sport		se, and other hobby equipment; bicycles, po y tools; musical instruments	pol tables, golf clubs, skis;	-
	✓ No ☐ Yes	s. Describ	oe]

Deb	tor 1	Mary L Robinson	Case number (if known)	
10.	•		ammunition, and related equipment	
	✓ No ☐ Yes	s. Describe		
11.	•		eather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes	s. Describe Clothes and	d miscellaneous wearing apparel	\$200.00
12.	Jewelr Examp		ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	☐ No ☑ Yes	s. Describe Miscellane	ous costume jewelry	\$30.00
13.		rm animals es: Dogs, cats, birds, horses		
	_	s. Describe Dog		\$50.00
14.	Any ot	•	l items you did not already list, including any health aids you	
		s. Give specific		
15.		-	entries from Part 3, including any entries for pages you have	\$2,280.00
Pa	art 4:	Describe Your Finan	cial Assets	
Doy	ou owr	or have any legal or equita	ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	es: Money you have in your v	wallet, in your home, in a safe deposit box, and on hand when you file your	
	□ No ✓ Yes	S	Cash:	\$50.00
17.	•	•	ner financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same	
	□ No ✓ Yes	S	Institution name:	
	17	.1. Checking account:	St Louis Community CU Checking account	\$100.00

Deb	tor 1	Mary L Robinso	on		Case number (if known)	
18.	Bonds, Example No					
	Yes					
19.	-	-	k and interests in ir tnership, and joint	ncorporated and unincorporated venture	businesses, including	
	info	:. Give specific rmation about m	Name of entity:		% of ownership:	
20.	Negotia	ble instruments inc	lude personal check	negotiable and non-negotiable in its, cashiers' checks, promissory no not transfer to someone by signing	tes, and money orders.	
	info	. Give specific rmation about	Issuer name:			
21.	Example	nent or pension ac es: Interests in IRA profit-sharing p	, ERISA, Keogh, 40	1(k), 403(b), thrift savings accounts	s, or other pension or	
	لنا	. List each ount separately.	Type of account:	Institution name:		
			Pension plan:	Bi State Union Pension pla	an - ERISA Qualified	Unknown
22.	Your sha		eposits you have ma	ade so that you may continue servid I rent, public utilities (electric, gas,		
	☑ No					
23.	_	es (A contract for		Institution name or individual: ayment of money to you, either for	life or for a number of years)	
	Yes		Issuer name and o	description:		
24.			IRA, in an account 9A(b), and 529(b)(1)		under a qualified state tuition pro	ogram.
	✓ No ☐ Yes	i	Institution name a	nd description. Separately file the	records of any interests. 11 U.S.C.	§ 521(c)
25.		equitable or future exercisable for ye		erty (other than anything listed in	line 1), and rights or	
	_	. Give specific rmation about them	n			
26.				ets, and other intellectual propert proceeds from royalties and licensing		
		. Give specific rmation about them	1			
27.	License	es, franchises, and	d other general inta	_	s, liquor licenses, professional licen	ses
		. Give specific				

Deb	tor 1	Mary L Robinson		Case	number (if known)		
Mor	ney or pr	operty owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	ınds owed to you					
29	abo you	. Give specific information ut them, including whether already filed the returns the tax years				Federa State: Local:	:
23.			alimony, spousal support, chi	d support, maintenance,	divorce settlement	t, propert	y settlement
	✓ No ☐ Yes	. Give specific information	١		Alimony:		
		·			Maintenar	ice:	
					Support:		
					Divorce se	ettlement	
					Property s	ettlemen	t:
31.	Interest Example No Yes com	. Name the insurance ipany of each policy	e insurance; health savings ac	count (HSA); credit, hom Beneficia			nce
		_	Term life through State fa				\$1.00
32.	If you ar entitled No	erest in property that is o			are currently		φ1.00
33.	Example No	es: Accidents, employmer	ether or not you have filed a t disputes, insurance claims,		and for payment		1
	Yes	. Describe each claim					
34.	rights to	ontingent and unliquidat o set off claims	ed claims of every nature, in	cluding counterclaims	of the debtor and		
	✓ No ☐ Yes	. Describe each claim					

Deb	tor 1	Mary L Robinson		Case number (if known)	
35.	Any fin	ancial assets you did	not already list		
	✓ No ☐ Yes	s. Give specific informa	ation]
36.			your entries from Part 4, including any entries for at number here		\$151.00
P	art 5:	Describe Any Bus	siness-Related Property You Own or Hav	e an Interest In. List any	real estate in Part 1
37.	Do you	own or have any lega	al or equitable interest in any business-related pro	operty?	
		Go to Part 6. Go to line 38.			
					Current value of the portion you own? Do not deduct secured
38.	Accour	nts receivable or com	missions you already earned		claims or exemptions.
	✓ No ☐ Yes	s. Describe			
39.		equipment, furnishing les: Business-related c desks, chairs, elec	computers, software, modems, printers, copiers, fax m	nachines, rugs, telephones,	-
	✓ No ☐ Yes	s. Describe			
40.	Machin	ery, fixtures, equipme	ent, supplies you use in business, and tools of you	ur trade	
	✓ No ☐ Yes	s. Describe			
41.	Invento	ory			-
	✓ No ☐ Yes	s. Describe			
42.	Interes	ts in partnerships or j	oint ventures		
	✓ No ☐ Yes	s. Describe Name	of entity:	% of ownership:	
43.	Custon	ner lists, mailing lists,	, or other compilations		
	✓ No ☐ Yes	s. Do your lists included No	de personally identifiable information (as defined in	n 11 U.S.C. § 101(41A))?	1
		☐ 100. Bosonbo	<u>"</u>]		

Deb	otor 1 Mary L Robinson Case number (if known)	
44.	Any business-related property you did not already list	
	✓ No ☐ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.✓ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish	γ
	☑ No	1
	Yes	
48.	Cropseither growing or harvested	
	✓ No Yes. Give specific information]
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	No No	1
	Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No ✓ Yes. Give specific	1
	information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00

Deb	otor 1	Mary L Robinson	Case number (if kn	own)	
P	art 7:	Describe All Property You Own or Have an	Interest in That You Did Not L	ist Above	
53.	•	have other property of any kind you did not already I les: Season tickets, country club membership	ist?		
	☑ No	s. Give specific information.			
54.	Add the	e dollar value of all of your entries from Part 7. Write	that number here	→	\$0.00
P	art 8:	List the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2		→	\$33,000.00
56.	Part 2:	Total vehicles, line 5	\$2,500.00		
57.	Part 3:	Total personal and household items, line 15	\$2,280.00		
58.	Part 4:	Total financial assets, line 36	<u>\$151.00</u>		
59.	Part 5:	Total business-related property, line 45	\$0.00		
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7:	Total other property not listed, line 54	+ \$0.00		

62. Total personal property. Add lines 56 through 61.....

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Copy personal property total

\$4,931.00

\$37,931.00

\$4,931.00

Fill in this inf	ormation to id	dentify your	case:					
Debtor 1	Mary	L	Robinsor	า				
Debtor 2	First Name	Middle Name	e Last Name					
(Spouse, if filing)		Middle Name						
United States Ba	inkruptcy Court for	the: EASTERI	N DISTRICT OF MIS	<u>sso</u>	URI		Check if this is an	
Case number (if known)	_						amended filing	
Official Form	106C							
Schedule C	: The Prope	rty You Cl	aim as Exemp	t			C)4/19
Using the property space is needed, f write your name ar For each item of p	you listed on Schill out and attach to acse number (if property you claim	edule A/B: Prop to this page as m known). m as exempt, ye	erty (Official Form 106 nany copies of Part 2	6A/B) 2: Ad) as your sou ditional Page unt of the ex	urce, list the e as nece	esponsible for supplying correct informate property that you claim as exempt. If ssary. On the top of any additional pagerou claim. One way of doing so value of the property being	more
exempted up to the receive certain be exemption of 100°	ne amount of any enefits, and tax-e % of fair market v	applicable stat kempt retiremei value under a la	utory limit. Some ex nt fundsmay be unl	emp imite mpti	otionssuch ed in dollar on to a part	n as those t amount. H ticular doll	for health aids, rights to lowever, if you claim an ar amount and the value of the	
Part 1: Ide	entify the Prop	erty You Cla	im as Exempt					
1. Which set of	exemptions are	you claiming?	Check one only, e	even	if your spou	ıse is filing	with you.	
<u> </u>	-		kruptcy exemptions.	11 U	.S.C. § 522(b)(3)		
☐ You are	claiming federal e	xemptions. 11 L	J.S.C. § 522(b)(2)					
2. For any prop	erty you list on S	Schedule A/B th	at you claim as exen	npt, 1	fill in the inf	formation I	below.	
Brief description Schedule A/B tha			Current value of the portion you own		ount of the emption you		Specific laws that allow exemption	
			Copy the value from Schedule A/B		eck only one ch exemptior			
Brief description:			\$33,000.00				Mo. Rev. Stat. § 513.475	
Principal Reside				$ \sqrt{} $	100% of fa			
Line from Schedul	e A/B: 1.1				applicable limit	•		
Brief description:			\$2,500.00	$\overline{\mathbf{V}}$	\$2,50	0.00	Mo. Rev. Stat. § 513.430.1(5)	
2003 Toyota Ma miles)	itrix (approx. 10	0,000			100% of fa			
Line from Schedul	e A/B: 3.1				applicable limit	•		
-	•	-	more than \$170,350? ears after that for cas		led on or afte	er the date	of adjustment.)	
✓ No ☐ Yes. Did ☐ No ☐ Yes		property covered	I by the exemption witl	hin 1	,215 days be	efore you fi	led this case?	

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Miscellaneous household goods and furnishings Line from Schedule A/B:6	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: Miscellaneous household electronics Line from Schedule A/B:	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: Clothes and miscellaneous wearing apparel Line from Schedule A/B:11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: Miscellaneous costume jewelry Line from Schedule A/B:12	\$30.00	\$30.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(2)
Brief description: Dog Line from Schedule A/B:13	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: Cash Line from Schedule A/B:16	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
Brief description: St Louis Community CU Checking account Line from Schedule A/B:	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
Brief description: Bi State Union Pension plan - ERISA Qualified Line from Schedule A/B: 21	Unknown	100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(10)(f)
Brief description: Term life through State farm, death benefit \$50k Line from Schedule A/B:31	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(7)

Fill in this inf	ormation to identif	v vour case:				
			Debinson			
Debtor 1	Mary L First Name N	liddle Name	Robinson Last Name			
Debtor 2 (Spouse, if filing)	First Name N	liddle Name	Last Name			
		ACTEDN DICT	DICT OF MISSOUR			
	nkruptcy Court for the: E	ASTERN DIST	RICT OF MISSOURI	<u> </u>		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Clair	ns Secured by	Property		12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.						
Part 1: Lis	t All Secured Clair	ns				
claim, list the creditor has a	ed claims. If a creditor creditor separately for exparticular claim, list the ible, list the claims in all ie.	ach claim. If more other creditors in	e than one Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the p secures the cla		\$60,769.00	\$30,000.00	\$30,769.00
US Bank Home Creditor's name	Mortgage	- Principal Res	sidence			
4801 Frederica S	St.	_				
Number Street		=				
			you file, the claim is:	Check all that apply.		
Owensboro	KY 42301	Contingent Unliquidate				
City	State ZIP Code	Disputed				
Who owes the del	ot? Check one.	Nature of lien.	Check all that apply.			
Debtor 1 only Debtor 2 only		_	ent you made (such as		car loan)	
Debtor 1 and D	Debtor 2 only		en (such as tax lien, me	echanic's lien)		
At least one of	the debtors and anothe	. —	ien from a lawsuit uding a right to offset)			
Check if this o			onal Real Estate			
Date debt was inc	urred <u>08/31/2006</u>	_ Last 4 digits o	f account number	7 8 4 8		
Refinanced ball	oon mortgage with n	naturity date of	September, 2021			
Add the dollar val that number here:	ue of your entries in C	olumn A on this p	page. Write	\$60,769.00		
If this is the last p	age of your form, add t	he dollar value t	otals from	\$60,769.00		

				I		
Fill in this inf	ormation to i	dentify your o	ase:			
Debtor 1	Mary First Name	L Middle Name	Robinson Last Name			
	1 list Hamo	Wildale Warrie	Last Namo			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptov Court fo	r that EASTEDN	I DISTRICT OF MISSOLIDI			
	Tikrupicy Court to	i tile. <u>EASTERN</u>	I DISTRICT OF MISSOURI			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
to this page. On t	t All of Your	PRIORITY Un	ill it out, number the entries in the vrite your name and case number (secured Claims ms against you?		ttach the Continu	ation Page
□ No. Go t		y unicodui ou oiu.	me agamer you .			
☐ No. Go t	or all 2.					
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority Nonpriority					m here and or's name. If a particular	
					amount	amount
2.1				\$0.00	\$0.00	\$0.00
Internal Revenue Priority Creditor's Nam			- Last 4 digits of account number			
PO Box 7346			When was the debt incurred?			
Number Street			As of the date you file the claim	is: Chack all that ann	- dv	
			 As of the date you file, the claim Contingent 	is. Check all that app	ny.	
Philedelphia	PA	19101-7346	Unliquidated			
City	State	ZIP Code	- Disputed			
Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ✓ Check one. Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify						
Is the claim subject No Yes	ct to offset?		_ ,			

Debtor 1 Mary L Robinson	Cas	se number (if known	ı)			
Part 1: Your PRIORITY Unsecured CI	aims Continuation Page					
After listing any entries on this page, number them previous page.	n sequentially from the	Total claim	Priority amount	Nonpriority amount		
2.2 Missouri Department of Revenue		\$0.00	\$0.00	\$0.00		
Priority Creditor's Name	Last 4 digits of account number					
Bankruptcy Unit	When was the debt incurred?					
Number Street PO Box 475	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					
301 W High St						
Jefferson City MO 65105 City State ZIP Code	Disputed					
Who incurred the debt? Check one.	Type of PRIORITY unsecured clain	n:				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 □ Domestic support obligations ☑ Taxes and certain other debts you □ Claims for death or personal injuintoxicated □ Other. Specify 	ou owe the governm	ent			

Debtor 1 Mary L Robinson	Case number (if known)	
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims	
Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unsetype of claim it is. Do not list claims already inclear 3. If more space is needed for nonpriority to	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, i luded in Part 1. If more than one creditor holds a particular claim, list the othe unsecured claims, fill out the Continuation Page of Part 2.	•
ELAN FINANCIAL SERVICE Nonpriority Creditor's Name 777 E WISCONSIN AVE Number Street Milwaukee WI 53202 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	Last 4 digits of account number 0 2 8 5 When was the debt incurred? 10/14/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
FNB Omaha Nonpriority Creditor's Name PO Box 3412 Number Street Omaha NE 68197 City State ZIP Code Who incurred the debt? Check one. I Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 9 4 4 8 When was the debt incurred? 10/10/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$7,469.00

Mary L Robinson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$264.00
Ginny's	Last 4 digits of account number 4 6 3 O	
Nonpriority Creditor's Name 1112 7th Ave.	When was the debt incurred? 05/28/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Monroe WI 53566		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.4		\$4,679.00
JPMCB CARD	Last 4 digits of account number 2 5 6 9	
Nonpriority Creditor's Name PO BOX 15298	When was the debt incurred? 01/12/2010	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
WILMINGTON DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? No		
☐ Yes		
4.5		\$11,661.00
Onemain Financial Nonpriority Creditor's Name	Last 4 digits of account number2486_	
NTBS-2320	When was the debt incurred? 02/11/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
6801 Colwell Blvd.	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	— ☐ Disputed	
Irving TX 75039 City State ZIP Code	—	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
Is the claim subject to offset?	Unsecured Loan	
No		
Yes		

Debtor 1 Mary L Robinson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$864.00
SYNCB/LOWES	Last 4 digits of account number 6 0 2 7	
Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred? 06/03/2000	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
ORLANDO FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.7		\$1,850.00
THD/CBNA	Last 4 digits of account number 2 6 0 2	-
Nonpriority Creditor's Name PO BOX 9714	When was the debt incurred? 03/15/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Johnson City TN 37615		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No ☐ Yes		
□ '		

Debtor 1	Mary L Robinson	Case number (if known)
Part 3:	List Others to Be Notified About a Debt That You Alrea	dv Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Collector of Reven		On which	entry in Part 1 or F	Part 2 did you list the original creditor?	
Name 41 S. Central Ave Number Street			Line	of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
St. Louis	МО	63105	—— Last 4 diç	gits of account num	ber
City	State	ZIP Code			

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. \$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b. \$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$0.00
			Total claim
Total claims from Part 2	6f.	Student loans	6f. \$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +\$30,882.00
	6j.	Total. Add lines 6f through 6i.	6j. \$30,882.00

Fill in this inf	ormation to iden				
Debtor 1	Mary First Name	L Middle Name	Robinson Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the	: EASTERN DISTR	CT OF MISSOURI		
Case number (if known) Check if this is an amended filing					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill ir	n this inf	ormation to i	dentify your case:	:		
Debtor	r 1	Mary First Name	L Middle Name	Robinson Last Name		
Debto			Middle Name	Last Name		
(Spous	se, if filing)	First Name	Middle Name	Last Name		
United	States Bar	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF MISSOURI		
Case r (if kno	number wn)				Check if this is an amended filing	
Officia	al Form	106H				
Sche	dule H:	Your Code	ebtors		1:	2/15
. □ 1. Do □	you have No Yes	any codebtors?	(If you are filing a joi	nt case, do not list either spous	e as a codebtor.)	
					? (Community property states and territories as, Washington, and Wisconsin.)	
	No. Go to Yes. Did		mer spouse, or legal e	quivalent live with you at the tim	ne?	
per cre	rson show editor on S	n in line 2 again chedule D (Offic	as a codebtor only if	that person is a guarantor or dule E/F (Official Form 106E/I	or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use	
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the de	bt
					Check all schedules that apply:	

G	ill in this inform	ation to identif	y your case:						
	Debtor 1	Mary	L	Robinso	n				
	Debtor 1	First Name	Middle Name	Last Name			— Che	ck if this is:	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			_ _	An amended filing	
	United States Bankro	intov Court for the:	FASTERN DI	STRICT OF MIS	รดบ	RI		A supplement showing	postpetition
	Case number	apicy Court for the.	<u> </u>	<u> </u>			—	chapter 13 income as of	of the following date:
	(if known)							MM / DD / YYYY	_
0	fficial Form 10	<u>61</u>							
S	chedule I: You	ur Income							12/15
res inc ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ing correct inform out your spouse. more space is nee	ation. If you are If you are separ ded, attach a se Answer every q	married and not ated and your spe parate sheet to th	filing ouse	jointly s not f	, and your : iling with y	I Debtor 2), both are eq spouse is living with you, ou, do not include info any additional pages, y	ou, rmation
1.	Fill in your employ								
	information.			Debtor 1				Debtor 2 or non-filin	g spouse
	If you have more the job, attach a separa		yment status	☐ Employed				☐ Employed	
	with information ab		,	✓ Not employed				☐ Not employed	
	additional employe	rs. Occup	ation						
	Include part-time, s or self-employed w	easonal,	yer's name						
	0								
	Occupation may in student or homema applies.	Empio	yer's address	Number Street				Number Street	
									
				City		State	Zip Code	City	State Zip Code
		How I	ong employed th	nere?			_		
F	Part 2: Give D	etails About Mo	onthly Incom	9					
				If you have noth	ning to	report	for any line	, write \$0 in the space.	Include your
	n-filing spouse unless ou or your non-filing:	,		er, combine the inf	ormat	ion for	all emplove	rs for that person on the	lines below. If
	u need more space, a			, combine the in	omia			io for that percent on the	mico polow. II
						For D	ebtor 1	For Debtor 2 or non-filing spouse	-
2.	List monthly gros payroll deductions) would be.	s wages, salary, a			2.		\$0.00		
3.	Estimate and list	monthly overtime	oay.		3.	+	\$0.00		
4.	Calculate gross in	come. Add line 2	+ line 3.		4.		\$0.00		

Deb	btor 1 Mary L Robinson		Case nu	ımber (if known)		
			For Debtor 1	For Debtor 2 o		
	Copy line 4 here	 → 4.	\$0.00			
5.	List all payroll deductions:	-	· · ·		_	
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		_	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		_	
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00		_	
	5h. Other deductions. Specify:	5h. +	\$0.00			
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e -		\$0.00		_	
7.	5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from	line 4. 7.	\$0.00		_	
		IIIIC 4. 7.	φυ.υυ		_	
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		_	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, at the total monthly net income.	nd				
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or dependent regularly receive	a 8c.	\$0.00		_	
	Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement.	,				
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$1,992.00		_	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Progra or housing subsidies. Specify:	m) 8f.	\$0.00		_	
	8g. Pension or retirement income	8g.	\$1,246.00	-	_	
	8h. Other monthly income.	og.	Φ1,240.00		_	
	Specify:	8h. +	\$0.00		_	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g	+ 8h. 9.	\$3,238.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	10. ouse.	\$3,238.00	+	_]=[\$3,238.00
11.	 State all other regular contributions to the expenses that you li Include contributions from an unmarried partner, members of your friends or relatives. Do not include any amounts already included in lines 2-10 or amounts 	household, yo	our dependents, yo			ا ماین
	Do not include any amounts already included in lines 2-10 of amou	inis inal ale n	ot available to pay	expenses listed in	Scried	
	Specify:			1	1. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in li income. Write that amount on the Summary of Your Assets and Li				L	\$3,238.00
	if it applies.					Combined monthly income
13.	Do you expect an increase or decrease within the year after yo	u file this for	m?			
	No. None. It is debtor's position that Social	-			ulatio	n of disposable
	Yes. Explain: income and is only listed to show her a	bility to ma	ke plan paymen	its.		

F	ill in this inforn	nation to iden	tify your case:				erast	••	
	Debtor 1	Mary	ı	Robin	son	l	ck if this An am	s is: ended filing	
	Debior 1	First Name	Middle Name	Last Nar		$\ \ $	A supp	lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me			r 13 expenses a ng date:	s of the
	United States Bank	ruptcy Court for th	e: EASTERN DIS	STRICT OF M	MISSOURI		MM / D	DD / YYYY	
	Case number (if known)								
O	fficial Form 10	D6J				_			
So	chedule J: Yo	our Expens	es						12/1
naı	rrect information. I	If more space is r	needed, attach anot nswer every questio	her sheet to th	ng together, both annis form. On the top				
1.	Is this a joint cas	se?							
2.	No	Debtor 2 live in a solution. s. Debtor 2 must pendents?	.	3J-2, Expenses	for Separate House Dependent's relati Debtor 1 or Debtor	onshi		2. Dependent's age	Does dependent live with you?
	Do not state the d names.	ependents'							Yes No No No No No Yes No Yes No No No
3.	Do your expense expenses of peo yourself and you	ple other than	☑ No ☐ Yes						- ∏ Yes
E	Part 2: Estima	ate Your Ongo	oing Monthly Ex	penses					
Est to	timate your expens	ses as of your bar s of a date after th	nkruptcy filing date ne bankruptcy is file	unless you ar	re using this form a supplemental Sche				
			sh government ass on Schedule I: Your					Your expens	ses
4.			penses for your res d any rent for the gro					4.	
	If not included in		. 0						
	4a. Real estate t	axes						4a	\$54.00
	4b. Property, hor	meowner's, or rent	er's insurance					4b	\$68.00
	4c. Home mainte	enance, repair, and	d upkeep expenses					4c	
	4d. Homeowner's	s association or co	ondominium dues					4d.	

Specify:

19. Other payments you make to support others who do not live with you.

19.

Debtor 1		Mary L Robinson	Case number (if knowr	1)
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	. Specify:	21.	-
22.	Calcu	alate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$1,988.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1,988.00
23.	Calcu	ulate your monthly net income.	_	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,238.00
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$1,988.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$1,250.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortg	. ,	
		No. Yes. Explain here:		
		None.		

	formation to i	identify your case			
Debtor 1	Mary First Name	L Middle Name	Robinson Last Name		
Debtor 2	riiotrianio	Middle Hame	Lactivanie		
Spouse, if filing	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court fo	or the: EASTERN DIS	STRICT OF MISSOURI		
Case number (if known)				Check if this is amended filing	
Official Form	 n 106Sum				
ummary o	f Your Ass	ets and Liabilit	ies and Certain Statisti	ical Information	12/1
orrect information	on. Fill out all of	f your schedules first; inal forms, you must f	ed people are filing together, both then complete the information on fill out a new Summary and check	this form. If you are filing amer	
					assets of what you own
	B: Property (Offici	ŕ			400 000 0
1a. Copy lin	ie 55, Total real es	state, from Schedule A	/B		\$33,000.00
1b. Copy lin	ne 62, Total person	nal property, from Sche	edule A/B		\$4,931.00
1c. Copy lin	ne 63, Total of all լ	property on Schedule A	/B		\$37,931.00
Part 2: Su	ımmarize You	ır Liabilities			
					r liabilities ount you owe
		-	Property (Official Form 106D) f claim, at the bottom of the last page	e of Part 1 of Schedule D	\$60,769.00
	, ou notou i				
2a. Copy the	F: Creditors Who I		s (Official Form 106E/F) ured claims) from line 6e of Schedule	ə E/F	\$0.00
2a. Copy the Schedule E/F 3a. Copy the	F: Creditors Who I e total claims fron	n Part 1 (priority unsecเ			\$0.00 \$30,882.00
2a. Copy the Schedule E/F 3a. Copy the	F: Creditors Who I e total claims fron	n Part 1 (priority unsecเ	ured claims) from line 6e of Schedule		\$30,882.00
2a. Copy the Schedule E/F 3a. Copy the 3b. Copy the	F: Creditors Who I e total claims fron e total claims fron	n Part 1 (priority unsecเ	ured claims) from line 6e of Schedule	dule E/F +	
2a. Copy the Schedule E/F 3a. Copy the 3b. Copy the Part 3: Su	F: Creditors Who I e total claims from e total claims from ummarize You Your Income (Office	n Part 1 (priority unsecung Part 2 (nonpriority unsecung Part 2 (nonpriori	ured claims) from line 6e of Schedule	Your total liabilities	\$30,882.00

Deb	otor 1	Mary L Robinson	Case number (if known)	
Ρ	art 4:	Answer These Questions for Administrative and Statistic	cal Records	
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?		
	ш.	o. You have nothing to report on this part of the form. Check this box and sues	bmit this form to the court with your other sch	edules.
7.	What k	kind of debt do you have?		
	Ľ	our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis		
		our debts are not primarily consumer debts. You have nothing to report o is form to the court with your other schedules.	n this part of the form. Check this box and su	ıbmit
8.		the Statement of Your Current Monthly Income: Copy your total current model. Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	onthly income from	\$1,246.00
9.	Copy t	the following special categories of claims from Part 4, line 6 of Schedule	E/F:	
			Total claim	
	From F	Part 4 on Schedule E/F, copy the following:		
	9a. D	omestic support obligations. (Copy line 6a.)	\$0.00	
	9b. Ta	axes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

Fill in this in	formation to i	dentify your case	:	
Debtor 1	Mary	L	Robinson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: FASTERN DIS	TRICT OF MISSOURI	
Case number	and aproy Country	<u> </u>	THIS I ST IMPOSSIN	
(if known)				Check if this is an amended filing
Official Form	106Dec			•
	•	ndividual Dobt	or's Schedules	12/1:
	About an i	ilaiviaaai Debi	or 3 octricuates	12/10
	gn Below or agree to pay s	someone who is NOT	an attorney to help you fill out	bankruptcy forms?
☑ No				
Yes. N	lame of person _			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penals true and cor		eclare that I have read	the summary and schedules f	iled with this declaration and that they are
X /s/ Mary	L Robinson		X	

Signature of Debtor 2

MM / DD / YYYY

Date

Mary L Robinson, Debtor 1

Date <u>04/16/2021</u> MM / DD / YYYY

				_	
Fill in this in	formation to	identify your case	:		
Debtor 1	Mary	L	Robinson		
	First Name	Middle Name	Last Name		
Debtor 2	Cinct Name	Middle News	Last Name		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: EASTERN DIS	TRICT OF MISSOURI		
Case number				☐ Check if this is an	
(if known)				amended filing	
Official Forn	0.107				
Statement of	of Financia	l Affairs for Ind	ividuals Filing for E	Bankruptcy	04/19
Part 1: Gi	ve Details Ab	out Your Marital S	tatus and Where You L	ived Before	
1. What is you ☐ Married ☑ Not marri	r current marital	status?			
2. During the l	ast 3 years, have	you lived anywhere o	ther than where you live nov	v?	
☑ No					
Yes. Lis	t all of the places	you lived in the last 3 y	ears. Do not include where yo	ou live now.	
(Community	• •	•	• .	community property state or territory? ana, Nevada, New Mexico, Puerto Rico, Texas,	
☑ No					
Yes. Ma	ike sure you fill ou	ut Schedule H: Your Co	debtors (Official Form 106H).		

Deb	tor 1	Mary L Robinson		Case nu	mber (if known)		
P	art 2:	Explain the Sources of	Your Income				
4.	Fill in th	u have any income from employ ne total amount of income you reco are filing a joint case and you have	eived from all jobs and all b	businesses, including par	t-time activities.	calendar years?	
	✓ No	s. Fill in the details.					
5.	5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.						
	List ead	ch source and the gross income from	om each source separately	v. Do not include income	that you listed in line 4.		
	□ No ☑ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
Ero	m lanus	ary 1 of the current year until	Social Security	\$8,000.00			
From January 1 of the current year until the date you filed for bankruptcy:		•	Pension	\$5,000.00			
For	the last	calendar year:	Social Security	\$13,500.00			
		December 31, 2020)	Pension	\$15,000.00			
For	the cale	endar year before that:	Social Security	\$13,000.00			
		December 31, 2019)	Pension	\$15,000.00			

Deb	otor 1	Mary L Robinson Case number (if known)
Р	art 3:	List Certain Payments You Made Before You Filed for Bankruptcy
6.	Are eithe	er Debtor 1's or Debtor 2's debts primarily consumer debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?
		☐ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts.
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?
		✓ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
7.	Insiders corporati agent, in	year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ons of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing cluding one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony.
	√ No	
	_	List all payments to an insider.
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider?
		payments on debts guaranteed or cosigned by an insider.
	✓ No ☐ Yes.	List all payments that benefited an insider.
Р	art 4:	Identify Legal Actions, Repossessions, and Foreclosures
9.	List all su	year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? uch matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody tions, and contract disputes.
	☑ No □ Yes.	Fill in the details.

Deb	tor 1	Mary L Robinson				Case number (if k	nown)	
10.	seized,	1 year before you file or levied? all that apply and fill in			ny of your property reposs	sessed, foreclosed	d, garnished, attach	ed,
	<u> </u>	Go to line 11. Fill in the information	n below.					
11.		•			any creditor, including a ba ayment because you owed		stitution, set off any	
	✓ No	s. Fill in the details.						
12.		1 year before you file rs, a court-appointed		• •	ny of your property in the pro	possession of an	assignee for the be	nefit of
	✓ No ☐ Yes	.						
P	art 5:	List Certain Gif	ts and	Contribution	ıs			
		2 years before you fil	ed for ba	ınkruptcy, did y	ou give any gifts with a to	tal value of more t	han \$600 per perso	n?
	☑ No	s. Fill in the details for						
14.	Within 2 to any 0	•	ed for ba	ınkruptcy, did y	ou give any gifts or contril	butions with a tota	al value of more tha	n \$600
	□ No ✓ Yes	s. Fill in the details for	each gift	or contribution.				
		tributions to charities ore than \$600	5		Describe what you contr	ibuted	Date you contributed	Value
Mt	Herald I	Baptist Church			Offering \$150/mo.		last year	\$1,800.00
	rity's Name 21 South ber Stre	nerland			-		previous year	\$1,800.00
Sai	nt Louis	3	MO State	63107 ZIP Code	-			
_	art 6:	List Certain Los		2 0000				
15.	Within '		d for bar	akruptcy or sind	ce you filed for bankruptcy	, did you lose any	thing because of the	eft, fire,
	✓ No ☐ Yes	s. Fill in the details.						

Debtor 1 Mary L Robinson			Case number (if known)				
Part 7: List Certain Payments or Tr			ents or Transfer	'S			
16.	Include	1 year before you filed for you consulted about set any attorneys, bankruptcy 5. Fill in the details.	eking bankruptcy o	r preparing a bankruptcy	petition?		-
	athan E		-	ion and value of any pro 313 filing fee; \$21 cred		Date payment or transfer was made	Amount of payment
Numl	ber Str	eet				4/14/2021	\$334.00
City		State ZIP	Code				
Emai	l or websi	te address					
	Within anyone Do not in No	lade the Payment, if Not You 1 year before you filed for who promised to help you need any payment or trans. 5. Fill in the details.	ou deal with your c	reditors or to make payn			perty to
18.	B. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.						
19.	 No Yes. Fill in the details. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						

Del	otor 1	Mary L Robinson Cas	se number (if known)
P	art 8:	List Certain Financial Accounts, Instruments, Safe Deposit	Boxes, and Storage Units
20.	benefit Include	n 1 year before you filed for bankruptcy, were any financial accounts or instrict, closed, sold, moved, or transferred? le checking, savings, money market, or other financial accounts; certificates of dees, pension funds, cooperatives, associations, and other financial institutions.	
	☑ No	o es. Fill in the details.	
21.	-	ou now have, or did you have within 1 year before you filed for bankruptcy, a curities, cash, or other valuables?	ny safe deposit box or other depository
	☑ No □ Yes	o es. Fill in the details.	
22.	☑ No	you stored property in a storage unit or place other than your home within 1 o es. Fill in the details.	year before you filed for bankruptcy?
P	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	ou hold or control any property that someone else owns? Include any proper ld in trust for someone.	ty you borrowed from, are storing for,
	✓ No ☐ Yes	o es. Fill in the details.	
Р	art 10:	: Give Details About Environmental Information	
For	the purp	rpose of Part 10, the following definitions apply:	
	hazardoı	nmental law means any federal, state, or local statute or regulation concernious or toxic substance, wastes, or material into the air, land, soil, surface wang statutes or regulations controlling the cleanup of these substances, waste	ater, groundwater, or other medium,
		eans any location, facility, or property as defined under any environmental la it or used to own, operate, or utilize it, including disposal sites.	w, whether you now own, operate, or
		lous material means anything an environmental law defines as a hazardous vance, hazardous material, pollutant, contaminant, or similar item.	waste, hazardous substance, toxic
Rej	oort all n	notices, releases, and proceedings that you know about, regardless of wher	they occurred.
24.	Has an	ny governmental unit notified you that you may be liable or potentially liable	under or in violation of an environmental
25.	Have y	es. Fill in the details. you notified any governmental unit of any release of hazardous material?	
	✓ No ☐ Yes	o es. Fill in the details.	

Deb	otor 1	Mary L Robinson		Case number (if known)
26.	Have you	ou been a party in any judicial or administr	ative proceeding under any	environmental law? Include settlements and
	☑ No □ Yes	s. Fill in the details.		
Р	art 11:	Give Details About Your Busines	s or Connections to Ar	ny Business
27.	Within d	4 years before you filed for bankruptcy, did ss?	d you own a business or hav	e any of the following connections to any
		A sole proprietor or self-employed in a trade A member of a limited liability company (LL A partner in a partnership An officer, director, or managing executive of the voting or equ	C) or limited liability partnershi	
	سنا	None of the above applies. Go to Part 12. s. Check all that apply above and fill in the de	etails below for each business.	
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties	, ,	ent to anyone about your business? Include
	□ No □ Yes	s. Fill in the details below.		
Р	art 12:	Sign Below		
tha pro or t	t answer perty by poth. 18	U.S.C. §§ 152, 1341, 1519, and 3571.	naking a false statement, cor	
		obinson, Debtor 1	Signature of Debtor 2	
	Date	04/16/2021	Date	
Did	you atta	ch additional pages to Your Statement of F	Financial Affairs for Individue	als Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay	or agree to pay someone who is not an at	torney to help you fill out ba	nkruptcy forms?
		me of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

compensation, is attached.

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

In re Mary L Robinson					Case No.	·
					Chapter	13
		DISCLO	SURE O	F COMPENSATION	OF ATTORNEY FO	R DEBTOR
th se	at comp	ensation paid to endered or to b	o me within o	ne year before the filing of	the petition in bankruptcy, o	r the above named debtor(s) and r agreed to be paid to me, for ection with the bankruptcy case
Fo	or legal :	services, I have	agreed to a	ccept		\$4,800.00
Pı	rior to th	e filing of this st	tatement I ha	ve received		\$0.00
Ва	alance [Due				\$4,800.00
2. Th	ne sourc	e of the compe	nsation paid	to me was:		
	$\overline{\checkmark}$	Debtor		Other (specify)		
3. Th	ne sourc	e of compensa	tion to be pa	id to me is:		
	✓	Debtor		Other (specify)		
4. v	-	e not agreed to ciates of my law		ove-disclosed compensation	on with any other person un	less they are members and
	Ihav	e agreed to sha	re the above	e-disclosed compensation v	vith another person or perso	ns who are not members or

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

$D \cap C \cap C$	/Farm	20201	(12/15)
n/U.SU	(– () () ()	70.5011	11//151

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Adversary Proceedings; Appeals

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 04/16/2021
 /s/ Jonathan Brent

 Date
 Jonathan Brent Attorney at Law

 Jonathan Brent Attorney at Law
 462 N Taylor

 Suite 106
 St. Louis, MO 63108

 Phone: (314) 200-5346 / Fax: (314) 735-4046

/s/ Mary L Robinson	
Mary L Robinson	

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

IN RE: Mary L Robinson CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor he	reby verifies that t	he attached list of	f creditors is tru	e and correct to t	he best of	his/her
know	ledge.						

Date	4/16/2021	Signature	/s/ Mary L Robinson Mary L Robinson
Date		Signature	

ChexSystems
Attn: Consumer Relations
7805 Hudson Road, Ste 100
Woodbury, MN 55125

Collector of Revenue (County) 41 S. Central Ave St. Louis, MO 63105

ELAN FINANCIAL SERVICE 777 E WISCONSIN AVE Milwaukee, WI 53202

Equifax P.O. Box 740241 Atlanta, GA 30374

Experian P.O. Box 4500 Allen, TX 75013

FNB Omaha PO Box 3412 Omaha, NE 68197

Ginny's 1112 7th Ave. Monroe, WI 53566

Internal Revenue Service PO Box 7346 Philedelphia, PA 19101-7346

JPMCB CARD PO BOX 15298 WILMINGTON, DE 19850 Missouri Department of Revenue Bankruptcy Unit PO Box 475 301 W High St Jefferson City, MO 65105

Onemain Financial NTBS-2320 6801 Colwell Blvd. Irving, TX. 75039

SYNCB/LOWES
PO BOX 965005
ORLANDO, FL 32896

Telecheck Attention: Bankruptcy Department P.O. Box 4451 Houston, TX 77210

THD/CBNA PO BOX 9714 Johnson City, TN 37615

Transunion P.O. Box 1000 Chester, PA 19022

US Bank Home Mortgage 4801 Frederica St. Owensboro, KY 42301

F	ill in this inf	ormation to ident	ify your case:			Check as o	directed in lines 1	7 and 21:		
D	ebtor 1	Mary First Name	L Middle Name	Robinson Last Name		According to statement:	the calculations require	ed by this		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		under 11	ble income is not deter			
U	nited States Ba	nkruptcy Court for the:	EASTERN DIST	TRICT OF MISSOL	JRI		ble income is determin U.S.C. § 1325(b)(3).	ed		
	ase number known)						nmitment period is 3 ye nmitment period is 5 ye			
Of	ficial Form	122C-1				Check if th	nis is an amended filin	g		
Cł	napter 13	Statement of Y tion of Commi			ome			04/20		
info	urate. If more ormation applie	nd accurate as possib space is needed, atta es. On the top of any lculate Your Avera	ch a separate sh additional pages	eet to this form. Inc , write your name a	clude the	line number to w	hich the additional			
1.	What is your	marital and filing stat	us? Check one or	nly.						
	Not married. Fill out Column A, lines 2-11.									
	Married. Fill out both Columns A and B, lines 2-11.									
	bankruptcy c August 31. If in the result.	erage monthly income ase. 11 U.S.C. § 101(the amount of your mo Do not include any inco hat property in one colu	(10A). For examp nthly income varied more amount more	le, if you are filing or ed during the 6 montl than once. For exar	Septembers, add the mple, if bot	er 15, the 6-mont income for all 6 th spouses own the	h period would be Mar months and divide the ne same rental propert	ch 1 through total by 6. Fill		
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
2.		rages, salary, tips, bor	nuses, overtime,	and commissions		\$0.00				
3.	Alimony and	maintenance paymen	ts. Do not include	e payments from a s	oouse.	\$0.00				
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.					\$0.00				
5.	Net income for	rom operating a busin	ess, profession,	or farm						
			Debtor 1	Debtor 2						
	Gross receipts deductions)	s (before all	\$0.00							
	Ordinary and expenses	necessary operating -	\$0.00		Сору					
	•	ncome from a business	\$0.00		here ->	\$0.00				

7. 8. Column A

Debtor 1

\$1,246.00

Column B
Debtor 2 or
non-filing spouse

6. Net income from rental and other real property

Gross receipts (before all deductions)	Debtor 1 \$0.00	Debtor 2			
Ordinary and necessary operating expenses Net monthly income from rental or other real property	\$0.00		Copy here →	\$0.00	
Interest, dividends, and royalties				\$0.00	
Unemployment compensation				\$0.00	
Do not enter the amount if you conter benefit under the Social Security Act.			_		
For you		\$0.0	00		
For your spouse					

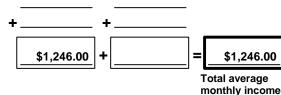
- Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.
- 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any. + _____ + ____

11. Calculate your total average monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.



Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$1,246.00

Deb	or 1	Mary L Robinson	Case number (if known)					
13.	Calc	culate the marital adjustment. Check one:						
	You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.							
4.4	Varr	Total		\$0.00				
		Your current monthly income. Subtract the total in line 13 from line 12.						
15.		culate your current monthly income for the year. Follow these	·	\$1,246.00				
	Tou.	Multiply line 15a by 12 (the number of months in a year).		X 12				
	15b.	15b. The result is your current monthly income for the year for this part of the form						
16.	Calc	culate the median family income that applies to you. Follow th	nese steps:					
	16a.	. Fill in the state in which you live.	lissouri					
	16b.	. Fill in the number of people in your household.	1					
	16c.	Fill in the median family income for your state and size of hous To find a list of applicable median income amounts, go online instructions for this form. This list may also be available at the	using the link specified in the separate	\$50,521.00				
17.	How	w do the lines compare?						
	17a.	Line 15b is less than or equal to line 16c. On the top of punder 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill	• • •					
	17b.	Line 15b is more than line 16c. On the top of page 1 of the 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calcula On line 39 of that form, copy your current monthly income	ation of Your Disposable Income (Official Form 122C-					
Pa	ırt 3	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)					
18.	Сор	by your total average monthly income from line 11.		\$1,246.00				
19.	that	duct the marital adjustment if it applies. If you are married, you acculating the commitment period under 11 U.S.C. § 1325(b)(4) ome, copy the amount from line 13.						
	19a.	. If the marital adjustment does not apply, fill in 0 on line 19a		\$0.00				
	19b.	Subtract line 19a from line 18.		\$1,246.00				

Deb	tor 1	Mary L Robinson	Case number (if known)	
20.	Calc	ulate your current monthly income for the year.	Follow these steps:	
	20a.	Copy line 19b		\$1,246.00
		Multiply by 12 (the number of months in a year).		X 12
	20b.	The result is your current monthly income for the	year for this part of the form.	\$14,952.00
	20c.	Copy the median family income for your state and	d size of household from line 16c.	\$50,521.00
21.	How	do the lines compare?		
	V	Line 20b is less than line 20c. Unless otherwise of check box 3, <i>The commitment period is 3 years.</i>	rdered by the court, on the top of page 1 of this form, Go to Part 4.	
		Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period</i> and the second seco	otherwise ordered by the court, on the top of page 1 is 5 years. Go to Part 4.	
P	art 4	Sign Below		
		igning here, under penalty of perjury I declare that t	the information on this statement and in any attachments is true and	d correct.
	<i>-</i>	Mary L Robinson, Debtor 1	Signature of Debtor 2	
	_	44400004	Date	
	L	Pate 4/16/2021 MM / DD / YYYY	Date MM / DD / YYYY	
		ואוואו / טט / זזזז	IVIIVI / DD / Y Y Y Y	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Current Monthly Income Calculation Details

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In re: Mary L Robinson Case Number: Chapter:

9. Pension and retirement income.

Debtor or Spouse's Income	or Spouse's Income Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month

<u>Pension</u> \$1,246.00 \$1,246.00 \$1,246.00 \$1,246.00 \$1,246.00 \$1,246.00 \$1,246.00